Officeholder, Candidate,  Type or print in link.					'ER PAGE - LONG FORN
and Controlled Committee		Statement covers period	Pate-Stamp.	NEX.	I COULT A PAR
Campaign Statement — Long Form	,	10-1-98	LUCCLAUD	10	37 A M 4 9 U
(Government Code Sections 84200-84216.5)		-	1001 22 AM H: :	****	
SEE INSTRUCTIONS ON REVERSE	throu	gh 10-22-98		ļ	1
Check one of the following boxes to indicate the type of statement being filed:	Da	te of election if applicable:	Sixt beattmon	Pag	
Pre-election Statement		(Month, Day, Year)	1 1011 7 (1140 - 11	*	For Official Use Only
Supplemental Pre-election Statement (Attach a completed Form 495 to this statement.)  Special Odd-Year Campaign Report			CITY OF LOBI		
Semi-annual Statement		11 -3 -98			
Termination Statement (Attach a completed Form 415 to this statement.)		<u></u>			
Officeholder, Candidate, and Controlled Committee	11	Utner Committees	Not included in th	is! ate	ment: List any other
Included in this Statement NAME OF OFFICEHOLDER OR CANDIDATE		committees not included in to committees of which you have	nis consolidated statement ve knowledge that are prin	that are co arily forme	introlled by you and any ed to receive contributions
Tanta Laa		or to make expenditures on			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)		COMMITTEE NAME			I.O. NUMBER
CITY COUNCIL			;		
AESIDENTIAL OA TYNNESS ADDRESS (NO. AND STALET)		HAME OF TREASURER		-	CONTROLLED COMMITTEET
1931 HOLLY DA		<del></del>			□ +ES □ HO
STATE LIP CODE ANEA CODE/DAYTIME PHONE	<b>-</b>	COMMITTEE ADDRESS	(HO. AND STREET)		
OMMITTEE NAME CA 95240 209 367037	/	CITY	STATE	ZIP CODE	AREA COULDAY IIIAE PHONE
COMMITTEE MAINE			2016	217 (00)	ANEX COODDATTIME PHONE
		COMMITTEE HAME			I.D. NUMBER
COMMITTEL ADDALSS (NO. AND STALET)					
CITY STATE ZIP CODE ANEA CODE/DAYTIME PHONE		NAME OF TREASURER	<del></del>		CONTAOLLED COMMITTEET
		•			☐ YES ☐ HO
NAME OF TREASURER &		COMMITTEE ADDRESS	(NO. AND STREET)		······································
DAWN C. SQUIRES					
PERMAHENT ADDRESS OF TAKASUARA (NO. AND STALLES)		CITY	STATE	ZIP CODE	AREA CODE/DAYTIME PHONE
568 HILDORN STATE EPODE ANACODEDAYTIME PHONE				<del></del>	
LODI CA 95240 209-334/934		Attach additional informatio	on on anneonelataly labala	d continuat	ion theets
$\frac{1}{2} \frac{1}{2} \frac{1}$		Attach acontona mionian			ion sneets.
Verification					•
I have used all reasonable diligence in preparing this statement. I have reviewed the statement a	nd to th	he best of my knowledge the in	formation contained here	n and in the	e attached schedules is
true and complete. I certify under penalty of perjury under the laws of the State of California tha	t the ro	av 177		ب نمان	•
Executed on 10 -98 At CITY AND STATE		") <del>                                     </del>	TIGNA UNE OF THEASUN	LA	<del> </del>
An officeholder or candidate who controls a committee must also verify the campaign statemen	t. I hav	e used all reasonable diligence	and to the best of my know	vledge the	treasurer has used all
reasonable diligence in preparing this statement. I have reviewed the statement and to the best complete. I certify under penalty of perjury under the laws of the State of California that the fore	of my k	nowledge the information con	tained hereinland the at	tached sche	edules is true and
_ ~ ~	yomy .	. / ///.	///.		
Executed on 10-21-98 At Lodi CA		Ву	SIGHATUAL BI CAHOIDATE/UI	ATGJOHIDI	
Executed on At		Ву	//		<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
DATE CITY AND STATE		- 0 u	CHEMATURE OF CANDIDATE/OF	HELHOLDER	,
Executed on At		8у	SIGNATURE OF CANDIDATE-OF	LICTHOLOLY	

		•	^
· · · · · · · · · · · · · · · · · · ·			المؤلا فيتناث بتويوات للنبوا المستوانية والمستوانية والمتابعة والمتابع والمتابعة والمتابعة والمتابعة والمتابعة والمتابعة والمت
Campaign Dividuos con constant	•		
Campaign Disclosure Statement Summary Page	Type or print in ink. Amounts may be rounded	Statement covers period	SUMMARY PAGE
	to whole dollars.	·	CALFORNIA 490
		110m 10-1-95	
SEE INSTRUCTIONS ON REVERSE		through 10 -22-95	Page 2 of1
NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE			I.D. NUMBER
Contributions Received	Column A		981919
	COLUMN A COLUMN STANCOL COLUMN STANCOLOULES)	Column 8 * 101AL PALVIOUS PLAND 101AL PALVIOUS PLAND 101AL PALVIOUS PLAND	Column C  TOTAL TO DATE  (ADD COLUMNS A + 1)
1. Monetary Contributions Schedule A, Line 3	1 1025.00	1 2696.00	1.3/21.00
2. Loans Received Schedule 8, Line 7			
3 SUBTOTAL CASH CONTRIBUTIONS	1 1025,00	1 20 96.00	1 3/2/,00
A Non-monetary Contributions Schedule C, Line 3	20	858.00	858.00
5. SUBTOTAL CONTRIBUTIONS (Exclude Enforceable Promises) Add Lines 3 + 4	1 1025.00	1 2954.00	, 3979.00
G. Enforceable Promises (Exclude Loan Guarantees, Une 18 below)			
7. TOTAL CONTRIBUTIONS RECEIVED	1 1025.00	1 2954.00:	1 3,979.00
Expenditures Made	" de des	(200 40	0.11.00: 6.3
B. Cash Payments (Other than Loans Made) Schedule E, Line 5	3 // 63. 10 10	1 1322.00	12426.80
9. Loans Made		(4 2 2 4 4 )	0.100000
10. SUBTOTAL CASH PAYMENTS	1-1104.00	s 1322.00	1 2426.00
12. TOTAL EXPENDITURES MADE	1-1104.00	1 13 27.00	1 2426.00
Current Cash Statement	,	,	446.00
13. Beginning Cash Balance Previous Summary Page, Une 17	774.00		
14. Cash Receipts Column A, Une Jabove	102500	* From previous Statement Summa this is the first report filed for the co	slendar year, Column B should be
15. Miscellaneous Increases to Cash	of the state of th	blank except for Loans Received (Li 6), Loans Made (Line 9), and Accrued	ne 2), Enforceable Promises (Line   Expenses (Line 1)).
16. Cash Payments Column A, Une 10 above	1104.00		
17. ENDING CASH BALANCE Add Lines 13 + 14 + 15, then subtract Line 16	695.00	Summary for Candidates	in Bath June and
If this is a termination statement, Line 17 must be zero.	FIIDING CASH BALANCE SHOULD	November Elections	
18. LOAN GUARANTEES RECEIVED	5	21. Contributions	500 · 711 to Date
Cash Equivalents and Outstanding Debts		22. Expenditures	200011 06
19. Cash Equivalents		Made s	3284,00
20. Outstanding Debts			12

ichedule. Monetary		Type or print ink. ounts may be rounded to whole dollars.	Statement co	1	HE CHENNES
			through 20 -:		sipposed to the
	ON REVERSE SOLDER OR CANDIDATE AND CONTROLLED COMMITTEE		, tinosyn Z	2.1	O. NUMBER
The C	committee to Elect JANE LEA	to Lodi City	Council		98 1919
DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (II COMMITTEE, MADDIGHT TO COMMITTEE'S MAKE AND ADDRESS, EMEALD, HUMBER DA II NO ED, NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER ATTEN, OTFORMER IN 1 HAME OF UNITED STATES  HAME OF UNITED STATES	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAR (JAN. 1 - DEC. 31)	e other
10/3/98	OPERATING ENGINERRS, LOCAL 3 DISTRICT SO PAC 1620 SO. LOOP Rd ALAMEDA CA 94502	# 5028 (650°) UNION # 5023(250°)	90000		,
0/13/98	NORTHERN CaliforniA CARPENTERS REGIONIAL COUNTIL 448 HEGENBERGER Rd Dahlaha, CA 94621-1418	UNION CK #000007 PAC 10851360	100,00		
		·	·		
		÷			
			eggalliteratus ett en Parkyan visanskynskynskyn ven		
		SUBTOTAL \$		WALE TO THE STATE OF THE STATE	
•	ontributions Summary eived this period — contributions of \$100 or more, chedule A subtotals.) eived this period — contributions of less than \$100. ize.) ary contributions received this period. and 2. Enter here and on the Summary Page, Column A, Lin			s 1000	,00
. Amount rece	rived this period — contributions of less than \$100.			, 250	

						••		
Allocation Page — Part II Contributions and Independent Expenditures Made From Personal Funds		Amount	or print i i may be whole doll	rounded	Statement co	vers period	ALLOCATION - PART I	
made LiOI	n Personal Funds				from OCT	I		
SEEINSTRUCTION	IS ON REVERSE			•	through OCT	22, 98 Page	4 019	
NAME OF OFFICE	HOLDER OR CANDIDATE				1			
the Co	ommittee to elect Jane Lea to	Loc	ali S	City	Counci			
List each cont	ribution and independent expenditure of \$100 or more made from olders, candidates and committees.	n the off	icehold	er or caṅdi	date's personal f	unds to support or o	ppose	
DATE	NAME OF OFFICEHOLDER, CANDIDATE, COMMITTEE, OR MEASURE	1 .	K ONE Oppole	IND. EXP	AMOUNT	CUMULATIVE TO DATE CALENDAR YEAR. (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)	
10-3-98	Debra Graverts, Assemble Dist.	7		-	40 00	40 00		
						· .		
							:	
*Secreverse re	l egarding independent expenditures.	<del>-1</del>	SI	JBTOTAL	5	Report And Profession		
ALLOCATION	PARTII SUMMARY	А	ltach ad	lditional ir	oformation on ap	propriately labeled	continuation sheets.	
	ns and independent expenditures of \$100 or more made this perional control of the perion Page — Part It subtotals.)	od Irom	persona	l lunds.		\$	¥.	
2. Contain a	and independent expenditures under \$100 made this period free.	om perso	onal fun	ds.		, 40°		
	his total to the Summary Page.)	rsonal fu	nds.			TOTAL \$ 40		

Schedui	1
<b>Payments</b>	and Contributions
(Other Tha	an Loans) Made

Type or print in ink.
.mounts may be rounded to whole dollars.

SCHEDULE E

Statement covers period

from Oct 1, 1998

through Oct 22, 1998

Page 5 of 1.D. NUMBER

(81919

SEE INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

The Committee to elect JANE LEA to Lodi City Council

CODES FOR CLASSIFYING EXPENDITURES

If one of the following codes accurately describes the expenditure, you may enter the code and leave the "Description of Payment" column blank. Refer to the back of Schedule E-Continuation Sheet for detailed explanations of each category.

"C" - MONETARY AND IN-KIND (NON-MONETARY)

CONTRIBUTIONS TO OTHER CANDIDATES AND COMMITTEES

TO -- INDEPENDENT EXPENDITURES -

"L" - LITERATURE

"B" -- BROADCAST ADVERTISING

"N" - NEWSPAPER AND PERIODICAL ADVERTISING

"O" - OUTSIDE ADVERTISING

"5" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS

"F" - FUNDIAISING EVENTS

"G" - GENERAL OPERATIONS AND OVERHEAD.

"I" - TRAVEL, ACCOMMODATIONS AND MEALS

(MUST BE DESCRIBED)

"P" - PROTESSIONAL MANAGEMENT AND CONSULTING SERVICES

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION IN COMMUTAL, IN ADDITION TO COMMUTAL'S HAME AND ADDRESS, ENTER LO. HUMBER OF, IN HOLD.	I. III ADDITION TO COMMITTIE'S HAME AND ADDRESS, ENTERSO. HUMBER OR IT HOLD. REPORT ONLY THE LUMP SUM OF SUCH PRYMENTS ON LINE 4 OF THE SUMMARY SECTION BELC					
HUMAKA HAS BEEN ASSIGNED, ENTER TALASUALA'S NAME AND ADDAESS}	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID			
ERNEST K BERGTHOLD, ENT ( 1601 FULTON AVE. #2 SACRAMENTO, CA 95825	2	Checks # 1030 and 1031	154.10			
VISION PRINTING. (466-0471. 127 W. HARDING Way STOCKTON, CA 95204	<u>L</u>	Cleck # 1032	915.88			
TREASUr'ER COMMITTEE to Elect JAMPLEX 508 HILDORN ST LODI, CA 75240	١	LUNCH MEETING TO BALANCE BUDGET PAID BY JAME LEA: CASH (RECEIPT)	33,91			
Important: Contributions and expenditures made out of campaign funds to officeholders, candidates, committees, or ballot measures must also be ente	or on be red on t	ehalf of other				
Payments and Contributions Made Summary						
1. Payments made this period of \$100 or more. (Include all Schedule E subtot	als.)	s <sub>1</sub>	069,98			
2. Payments made this period of under \$100. (Do not itemize.)						
3. Total interest paid this period on outstanding loans. (Enter amount from Schedule B, Part II, Column (d).)						
4. Total accrued expenses paid this period. (Do not itemize. Enter amount from Schedule F, Line 4.)						
5. Total payments made this period. (Add Lines 1, 2, 3, and 4. Enter here and	on the S	ummary Page, Column A, Line 8.) TOTAL	103,89			